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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934
or Section 30(h) of the Investment Company Act of 1940

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

1. Name and Address of Reporting Person * <u>Guidroz Elaine</u> (Last) (First) (Middle) <u>C/O FULL HOUSE RESORTS, INC.</u> <u>1980 FESTIVAL PLAZA DRIVE, SUITE 680</u> (Street) <u>LAS VEGAS NV 89135</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>FULL HOUSE RESORTS INC [FLL]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>SVP Secretary, General Counsel</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>05/14/2026</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	05/14/2026		A		43,750 ⁽¹⁾	A	\$0	135,061 ⁽²⁾	D	
Common Stock								608	I	By Spouse

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date					

Explanation of Responses:

- This grant of 43,750 shares of restricted stock was approved by the compensation committee of the board of directors (the "Compensation Committee") of Full House Resorts, Inc. (the "Company") under the Company's 2025 Equity Incentive Plan pursuant to the Annual Incentive Plan for Executives (the "Plan"). The restricted stock will vest in three equal annual amounts on May 14, 2027, 2028 and 2029.
- Not included in this report is the grant of 43,750 shares of restricted stock approved by the Compensation Committee of the board of directors of the Company under the Plan. The restricted stock will vest in three equal annual amounts on May 14, 2027, 2028 and 2029, subject to the achievement of certain performance-based criteria in 2026, 2027 and 2028, including annual growth rates of EBITDA and free cash flow per share. Each such annual amount will be reported following the date of vesting.

/s/ Lewis A. Fanger, Attorney-in-Fact 05/18/2026

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.